

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

WALTER M. DICKIE, M.D., Director

Weekly



Bulletin

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SAN FRANCISCO
State Office Building, McAllister and
Larkin Streets UNDERHILL 8700

SACRAMENTO
State Office Building, 10th and L Streets
Capital 2800

LOS ANGELES
State Office Building, 217 West First
Street MADISON 1271

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GUY P. JONES
EDITOR

Regulations for German Measles Amended

At its regular meeting held in San Francisco, January 20, 1937, the State Board of Public Health amended Rules 5 and 6 of the State regulations for the prevention and control of German measles. The complete regulations now read as follows:

REGULATIONS OF THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH FOR THE PREVENTION OF GERMAN MEASLES

Rule 1. Notification.

Any person in attendance on a case of German measles, or a case suspected of being German measles, shall report the case immediately to the local health authority, who shall in turn report at least weekly, on the prescribed form, to the Director of the State Department of Public Health all cases so reported to him.

NOTE.—The report to the local health authority shall be in writing unless local rules permit notification by telephone.

When no physician is in attendance it shall be the duty of the head of the private house, or the proprietor or keeper of any hotel, boarding house, lodging house or superintendent of any orphanage or school to report forthwith to the local health officer all the facts relating to the illness and physical condition of any person in any private house, hotel, boarding house, lodging house, orphanage or school under his charge who appears to be affected with any disease

presumably communicable, together with name of such person.

Rule 2. Instructions to household.

It shall be the duty of the physician in attendance on any case suspected by him to be German measles to give detailed instructions to the nurse or other person in attendance in regard to precautionary measures for preventing the spread of this disease.

Rule 3. Investigation of cases.

Upon being notified of a case of German measles, the local health authority shall make an inquiry regarding the probable source of infection. If this source of infection is outside his jurisdiction, he shall notify the State Department of Public Health in order that it may inform the health authority (local or State) within whose jurisdiction the infection was probably contracted. The local health officer shall determine that the instructions are understood and observed and, in the event of nonobservance, shall take proper legal steps for their enforcement.

Rule 4. Isolation.

It shall be the duty of the local health officer to see that cases of German measles are properly isolated, and to define the area within which the patient and his immediate attendants are to be isolated. Without permit from the local health officer, no person shall carry, remove or cause to be carried or removed from

any hotel, boarding house, lodging house or other dwelling, any person affected with German measles. Isolation in this disease is defined as that degree of detention necessary to insure noncontact with susceptible persons.

Rule 5. Contacts.

When a person affected with German measles is properly isolated, members of the family or household are not subject to any restrictions.

Rule 6. Release from isolation.

The period of isolation shall be until clinical recovery.

Rule 7. Exclusion by school authorities.

It shall be the duty of the principal or other person in charge of any public, private or Sunday school to exclude therefrom any child or other person affected with a disease presumably communicable until such child or other person shall have been seen by the school physician or nurse, or shall have presented a certificate issued by the local health officer, or by the attending physician, and countersigned by the local health officer, stating that such child or other person is not liable to convey a communicable disease.

Rule 8. Disinfection.

Concurrent Disinfection.—All discharges from the nose and mouth of the patient shall be immediately disinfected by boiling or shall be burned. Objects which may have been contaminated by the patient shall be disinfected before being removed to any place where they might become possible sources of infection. Clothing and bedding that have been contaminated by the patient, as well as the dishes used by the patient, shall be sterilized by boiling or immersion for twenty minutes in 2 per cent carbolic acid or liquor cresolis compositus.

Terminal disinfection shall consist of thorough cleaning by scrubbing and washing with hot water and soap of material on which and in which bacteria may find favorable conditions for prolonging life and virulence.

S. C. P. H. A. ELECTS OFFICERS

At the annual meeting of the Southern California Public Health Association held in Los Angeles, February 11, 1937, the following officers were elected for the current year: K. H. Sutherland, M. D., President; G. E. McDonald, M. D., President-Elect; Capt. George F. Cottle, First Vice President; R. C. Main, M. D., Second Vice President; R. L. Kaufman, M. D., C. P. H., Secretary-Treasurer.

HOSPITAL CONFERENCE IN LOS ANGELES

The Eleventh Annual Exposition and Convention of the Association of Western Hospitals, the Association of California Hospitals and the Western Conferences of the Catholic Hospital Association and allied groups and sections will meet April 12 for a three-day session at the Biltmore Hotel in Los Angeles.

R. E. Heermon, superintendent of the California Hospital, is chairman of the Convention Committee, and the program is being worked out under the chairmanship of R. G. Walker, auditor of the same institution.

Other committees and their chairmen are Exhibit, G. S. Luther, Superintendent of White Memorial Hospital; Travel and Hotels, D. L. Smith, Superintendent of Santa Fe Coast Lines Hospital; Clubs, Dr. J. Rollin French, Golden State Hospital; Radio, Dr. Glenn Myers, Medical Director of Compton Sanitarium; Miss M. K. West, Superintendent of Methodist Hospital of Southern California; Trustees' Section, Roland Maxwell, President of the Board of Methodist Hospital, and Banquet and Entertainment, A. J. Will, Superintendent of Olive View Sanitorium.

Timely subjects to be discussed by prominent and authoritative speakers are "Manifold Obligations of the Hospital to the Public"; "Legislation and Hospitals"; "Group Hospitalization"; "The Interest of the Patient Is Paramount"; "The Growth, Cause, and Curse of Malpractice Suits"; and "Employee Welfare."

In addition there will be sectional meetings of special interest to directors of public health, and all department heads of the various State, county, and city health departments.

1. Public Hospital Section,
Dr. H. M. Ginsburg, Chairman,
Fresno, California.
2. Cancer Clinics on the Pacific Coast,
Dr. Wm. R. Dorr, Chairman,
Arlington, California.

We should endeavor to get ideas from those who conceived or created them, thus bringing directly to bear upon our lives their wisdom and conceptions of beauty. Not content with the distorted impressions of second-hand report, we should let creative men speak directly to us. How can this be done? By coming to know their lives and their works—the books they wrote, the truths they established, the principles of ordered society they laid down, the songs they composed, the pictures and statues they made, and the cathedrals they built. They quicken us to our best; they are the great teachers of the race.

BERKELEY ADJUSTS BIRTH AND DEATH RATES FOR RESIDENCE

By MRS. BLANCHE KNIGHT,
Statistician, Berkeley Health Department.

Berkeley, for a number of years, has adjusted birth, death and infant mortality rates for residence, in so far as Oakland and San Francisco are concerned. This city is near San Francisco and adjacent to various East Bay cities, particularly Oakland. San Francisco and Oakland are larger cities with many hospitals, and in Oakland is located the Alameda County Hospital in which Berkeley indigent patients are hospitalized. Birth and death certificates are, in accordance with State law, filed in the city or registration district in which they occur. For this reason a particular need was felt in Berkeley of making some arrangement to adjust birth and death figures for residence. The many Berkeley babies born in Oakland hospitals, for example, are included in the Oakland crude birth rate, and have given Berkeley a fictitiously low crude birth rate for a number of years. While birth rates have been declining in many communities, the downward trend of the crude birth rate was more pronounced in Berkeley than in other communities.

To remedy this, a voluntary exchange of birth and death certificates of Berkeley residents was negotiated with Oakland and San Francisco in 1926. Since that time we have received, through the kindness of these cities, photostatic copies of all birth and death certificates filed on which the home address or residence is given as Berkeley. These copies have been bound and are available for our statistical analysis at all times. In addition to these copies, the number of births, deaths, infant deaths and stillbirths was tallied from the two health department records for the years 1918 to 1925 inclusive. This gives us rates, adjusted for residence in so far as Oakland and San Francisco are concerned, from 1918 to date. If it were possible or practicable for us to obtain records from other neighboring communities, or if the adjustment could be made for all communities in California, the rates would be even more valuable.

These rates, were computed on the basis of a corrected number of births, deaths, infant deaths and stillbirths obtained by subtracting the number of Oakland and San Francisco residents from our crude figures, and adding the number of Berkeley residents who died, were born or stillborn in Oakland and San Francisco.

The following tables show the decided change in the picture of Berkeley's vital statistics made by this partial adjustment for residence:

BERKELEY, CALIFORNIA

Years	Births Per 1000 Population		Deaths Per 1000 Population		Infant Deaths Per 1000 Live Births	
	Crude	Adjusted	Crude	Adjusted	Crude	Adjusted
1918 -----	16.8	18.3	12.9	13.3	56.6	62.2
1919 -----	15.9	17.8	10.4	10.8	44.4	43.0
1920 -----	17.0	18.4	10.2	10.7	44.0	45.4
1921 -----	16.8	18.2	9.2	9.7	39.1	37.8
1922 -----	15.0	16.8	8.5	9.2	36.8	40.4
1923 -----	14.7	15.8	8.6	8.6	41.4	31.6
1924 -----	13.4	16.4	9.3	9.9	51.4	45.5
1925 -----	12.7	16.6	8.9	9.6	47.9	47.0
1926 -----	11.8	15.3	9.2	9.9	41.6	41.3
1927 -----	10.1	14.8	8.2	8.7	42.1	40.2
1928 -----	10.4	14.5	9.1	9.9	30.7	30.1
1929 -----	10.0	13.0	8.3	9.4	34.8	38.4
1930 -----	9.5	12.9	7.6	8.7	31.8	29.9
1931 -----	8.1	11.9	8.1	9.0	27.5	22.6
1932 -----	6.4	9.5	6.8	8.1	24.8	34.9
1933 -----	6.4	9.2	7.0	8.4	20.6	24.2
1934 -----	6.8	9.7	7.0	8.1	35.2	22.3
1935 -----	7.6	9.8	7.6	8.6	31.7	37.8
1936						

SUBSTITUTION OF WATER FOR INSULIN BRINGS IMPRISONMENT

For some time several physicians in Los Angeles have been returning packages of insulin to druggists because of the non-therapeutic value of the alleged insulin product. Investigations revealed that ordinary tap water had been substituted for insulin which had been withdrawn from the vials and the packages sealed in such a manner that no one, except upon close examination, could detect that the packages had been tampered with. It was found that at least seven drug stores were involved and serious results occurred in at least two patients suffering from diabetes and who had used the injurious substitution.

Milton P. Duffy, Chief of the Bureau of Food and Drug Inspection of the California State Department of Public Health launched an investigation which resulted in the conviction, with a year's imprisonment in jail of one Bernard Forthal. This man suffered from diabetes and at his trial it was brought out that he and his wife made it a practice to purchase insulin at various drug stores asking for a well known brand but giving a fictitious number. Upon being told that there was no such number associated with the brand, they purchased the standard product. After a few days the package would be returned with the request that money be refunded for the reason it was not the product ordered by the physician. It was revealed that this swindler had removed the insulin through its rubber cap by means of a hypodermic needle and the tap water placed in the empty vial by the same method. The soft rubber closed so that the damage to the cap was barely discernible even upon close inspection. Persistent and careful investigation led to the arrest of Forthal and his wife. Forthal was convicted and given a sentence of a year in the county jail and his wife was released.

It would seem that this is one of the most contemptible violations of the Pure Food law that has come to light. There is no way of determining how many diabetics have been made to suffer through this criminal substitution. The investigation of the convicted individual and his detection constituted a credible activity upon the part of the Bureau of Food and Drug Inspection.

MORBIDITY**Complete Report for Following Diseases for Week Ending February 27, 1937****Chickenpox**

1020 cases: Alameda County 2, Alameda 20, Berkeley 38, Oakland 23, San Leandro 5, Butte County 5, Chico 16, Contra Costa County 34, Pittsburg 2, Fresno County 31, Coalinga 2, Fresno 10, Sanger 1, Humboldt County 1, Arcata 3, Imperial County 4, El Centro 3, Imperial 1, Kern County 22, Bakersfield 3, Taft 3, Los Angeles County 38, Alhambra 4, Beverly Hills 1, Burbank 2, Claremont 2, Culver City 1, El Segundo 1, Glendale 7, Huntington Park 6, Inglewood 10, Long Beach 24, Los Angeles 114, Monrovia 1, Pasadena 15, Pomona 7, Redondo 1, San Marino 3, Santa Monica 6, South Pasadena 1, Whittier 4, Lynwood 5, Hawthorne 3, South Gate 17, Signal Hill 1, Maywood 3, Madera County 3, Marin County 2, Mill Valley 2, San Rafael 5, Yosemite National Park 1, Mendocino County 7, Merced County 2, Monterey County 5, Monterey 1, Salinas 5, Napa County 3, Napa 1, Orange County 4, Anaheim 4, Fullerton 6, Orange 1, Santa Ana 12, Auburn 1, Riverside County 6, Corona 6, Riverside 22, Sacramento County 9, Sacramento 67, San Bernardino County 1, Ontario 8, San Bernardino 19, San Diego County 25, Chula Vista 20, National City 5, Oceanside 3, San Diego 50, San Francisco 104, San Joaquin County 9, Lodi 2, Stockton 3, Tracy 1, San Mateo County 1, San Mateo 4, Santa Barbara County 4, Santa Barbara 17, Santa Clara County 17, Los Gatos 1, Mountain View 1, Palo Alto 1, Santa Cruz 3, Watsonville 5, Shasta County 1, Santa Rosa 1, Stanislaus County 1, Modesto 2, Tulare County 9, Lindsay 1, Visalia 14, Ventura County 4, Oxnard 1, Santa Paula 1.

Diphtheria

27 cases: Albany 1, Oakland 3, San Leandro 1, Fresno County 1, Los Angeles County 1, Huntington Park 1, Los Angeles 8, Bell 1, Monterey County 1, Orange County 1, Riverside County 1, Sacramento County 1, San Diego 1, San Francisco 1, Redwood City 1, Yuba City 1, Marysville 1.

German Measles

35 cases: Berkeley 5, Pittsburg 5, Fresno County 1, Eureka 5, Los Angeles County 1, Culver City 1, Long Beach 3, Los Angeles 2, San Marino 3, Santa Monica 1, South Gate 1, Fullerton 1, National City 1, San Francisco 3, San Luis Obispo 1, Stanislaus County 1.

Influenza

2397 cases: Berkeley 16, Oakland 12, Chico 175, Fresno County 197, Fresno 9, Eureka 3, Inyo County 1, Kern County 119, Bakersfield 2, Los Angeles County 152, Alhambra 4, Burbank 1, Compton 1, El Monte 11, Glendale 1, Huntington Park 8, La Verne 17, Long Beach 6, Los Angeles 59, Montebello 1, Pasadena 5, Redondo 1, San Fernando 1, San Marino 20, Santa Monica 1, South Gate 4, Maywood 1, Bell 1, Madera County 143, Madera 78, Mendocino County 7, Ukiah 1, Los Banos 3, Carmel 9, Orange County 6, Anaheim 16, Brea 10, Fullerton 10, Orange 4, Santa Ana 3, La Habra 1, Tustin 1, Placer County 18, Auburn 29, Riverside County 7, Riverside 1, Sacramento County 9, Sacramento 89, San Bernardino County 5, Rialto 88, San Bernardino 5, San Diego County 71, Oceanside 38, San Diego 2, San Francisco 15, Manteca 85, San Luis Obispo County 3, Paso Robles 5, San Luis Obispo 6, San Mateo County 80, Santa Barbara County 1, Santa Barbara 1, Santa Clara County 105, Los Gatos 68, Mountain View 2, Palo Alto 2, Santa Cruz County 75, Santa Cruz 44, Watsonville 11, Petaluma 1, Stanislaus County 22, Newman 35, Turlock 112, Tehama County 29, Tulare County 2, Visalia 6, Ventura County 8, Santa Paula 194, Yolo County 2.

Measles

121 cases: Berkeley 1, Oakland 5, Crescent City 2, El Dorado County 1, Imperial County 1, Kern County 1, Los Angeles County 10, Glendale 15, Long Beach 25, Los Angeles 25, Monrovia 3, Pasadena 1, Merced County 2, Los Banos 1, Santa Ana 2, Lincoln 1, Riverside County 3, Corona 1, Riverside 2, Sacramento 2, Ontario 6, Rialto 1, San Diego 1, San Francisco 2, San Luis Obispo 1, Daly City 1, Turlock 1, Tehama County 1, Yuba County 3.

Mumps

796 cases: Alameda 11, Berkeley 42, Oakland 12, Butte County 5, Angels Camp 1, Contra Costa County 8, Pittsburg 8, Richmond 2, Fresno County 14, Fresno 4, Orland 1, Humboldt County 2, Arcata 9, Eureka 2, El Centro 12, Imperial 2, Inyo County 1, Kern County 35, Bakersfield 1, Kings County 6, Los Angeles County 29, Alhambra 5, Beverly Hills 4, Burbank 4, Culver City 1, El Segundo 1, Glendale 16, Hermosa 6, Huntington Park 3, Long Beach 4, Los Angeles 32, Pasadena 7, Pomona 8, Redondo 1, San Gabriel 1, San Marino 1, Santa Monica 1, South Pasadena 1, Lynwood 3, Hawthorne 2, South Gate 10, Gardena 1, Madera County 1, Marin County 1, Monterey County 1, Orange County 8, Brea 4, Fullerton 2, Orange 3, Santa Ana 40, Lincoln 12, Riverside County 21, Hemet 1, Riverside 36, Sacramento 1, San Bernardino County 1, Ontario 7, Redlands 2, Rialto 3, San Bernardino 85, San Diego County 18, Chula Vista 14, Coronado 2, El Cajon 4, National City 4, San Diego 40, San Francisco 108, San Joaquin County 8, Lodi 1, Stockton 2, San Luis Obispo County 1, Daly City 4, Santa Barbara 1, Santa Clara County 11, Vallejo 1, Stanislaus County 6, Modesto 1, Tulare County 3, Exeter 1, Lindsay 1, Visalia 7, Ventura County 6, Santa Paula 2, Yolo County 2.

Pneumonia (Lobar)

109 cases: Berkeley 3, Oakland 6, Fresno County 4, Fresno 1, Humboldt County 1, Eureka 2, Kern County 2, Los Angeles County 14, Burbank 1, Long Beach 2, Los Angeles 35, Monrovia 2, Montebello 1, Pasadena 1, Pomona 1, Whittier 1, Gardena 1, Mendocino County 1, Monterey County 1, Napa 1, Corona 2, Riverside 1, Sacramento County 4, Sacramento 5, San Bernardino 1, San Diego County 3, National City 1, San Francisco 3, San Luis Obispo County 1, Paso Robles 1, San Luis Obispo 1, Burlingame 1, Santa Barbara County 1, Watsonville 1, Ventura County 1, Santa Paula 1.

Scarlet Fever

249 cases: Berkeley 3, Oakland 8, Butte County 4, Chico 3, Colusa County 1, Contra Costa County 1, Antioch 1, Richmond 1, Fresno County 9, Fresno 8, Humboldt County 8, Arcata 2, Eureka 1, Imperial County 1, Westmoreland 1, Kern County 2, Bakersfield 2, Taft 2, Los Angeles County 17, Alhambra 3, Arcadia 1, Compton 1, El Segundo 1, Glendale 1, Inglewood 1, Long Beach 2, Los Angeles 28, Montebello 1, Pasadena 4, San Gabriel 1, Santa Monica 1, Sierra Madre 1, Whittier 1, Torrance 1, South Gate 1, San Rafael 1, Mariposa County 6, Merced County 4, Merced 2, Napa County 4, Napa 7, Orange County 4, Fullerton 2, Orange 1, Placer County 2, Auburn 4, Riverside County 5, Hemet 1, Sacramento County 1, Sacramento 10, San Bernardino 2, San Diego County 1, San Diego 3, San Francisco 30, San Joaquin County 4, Stockton 4, Paso Robles 1, San Mateo County 1, Lompoc 1, Santa Clara County 4, Palo Alto 1, Sunnyvale 1, Santa Cruz County 2, Shasta County 3, Siskiyou County 1, Vacaville 1, Turlock 1, Tulare County 4, Lindsay 1, Yolo County 5.

Smallpox

9 cases: Burbank 3, Merced County 1, Riverside County 1, Siskiyou County 3, Ventura County 1.

Typhoid Fever

One case: Tulare County.

Whooping Cough

348 cases: Alameda County 4, Berkeley 2, Oakland 6, Antioch 4, Fresno County 8, Fresno 12, Selma 2, El Centro 14, Lassen County 2, Los Angeles County 42, Burbank 1, Culver City 1, Glendale 1, Inglewood 8, Long Beach 2, Los Angeles 46, Pasadena 14, Pomona 2, Santa Monica 13, South Pasadena 1, Hawthorne 1, South Gate 3, Gardena 3, San Rafael 1, Orange County 11, Anaheim 4, Santa Ana 1, Auburn 2, Plumas County 12, Riverside County 27, Corona 1, Riverside 1, Sacramento 4, San Bernardino County 1, San Bernardino 10, San Diego County 4, El Cajon 1, San Diego 5, San Francisco 12, San Joaquin County 6, San Luis Obispo County 2, Burlingame 1, Daly City 1, Santa Barbara County 5, Santa Barbara 3, Santa Maria 5, Santa Clara County 4, Santa Rosa 2, Stanislaus County 1, Modesto 3, Tulare County 9, Exeter 1, Ventura County 14, Yolo County 1, Woodland 1.

Meningitis (Epidemic)

14 cases: Amador County 1, Imperial County 2, Los Angeles County 3, Compton 1, Huntington Park 1, Los Angeles 3, Plumas County 1, San Luis Obispo County 1, Petaluma 1.

Dysentery (Amoebic)

One case: California.*

Tetanus

2 cases: Los Angeles 1, Gardena 1.

Trachoma

4 cases: Los Angeles 2, National City 2.

Encephalitis (Epidemic)

2 cases: San Francisco 1, San Joaquin County 1.

Trichinosis

One case: Vacaville.

Food Poisoning

One case: San Francisco.

Undulant Fever

2 cases: Calexico 1, San Luis Obispo County 1.

Septic Sore Throat (Epidemic)

One case: Alhambra.

Rabies (Animal)

32 cases: Fresno County 2, Los Angeles County 6, Huntington Park 1, Inglewood 1, Long Beach 2, Los Angeles 12, Montebello 1, Torrance 1, Monterey County 1, Orange County 3, Fullerton 1, Watsonville 1.

* Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.